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| <b>TRANSMITTAL LETTER TO THE UNITED STATES<br/>DESIGNATED/ELECTED OFFICE (DO/EO/US)<br/>CONCERNING A SUBMISSION UNDER 35 U.S.C. 371</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                           | ATTORNEY'S DOCKET NUMBER<br><b>836567610047</b><br>U.S. APPLICATION NO. (If known, see 37 CFR 1.5)<br><b>10/518739</b> |
| INTERNATIONAL APPLICATION NO.<br>PCT/EP2003/006550                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | INTERNATIONAL FILING DATE<br>20 June 2003 | PRIORITY DATE CLAIMED<br>20 June 2002                                                                                  |
| TITLE OF INVENTION<br><b>A Stroke Adjusting Device for Valves of a Combustion Engine</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                           |                                                                                                                        |
| APPLICANT(S) FOR DO/EO/US<br><b>Rudolf FLIERL, Mark Andy MOHR, Daniel GOLLASCH</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                           |                                                                                                                        |
| Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                           |                                                                                                                        |
| 1. <input checked="" type="checkbox"/> This is a <b>FIRST</b> submission of items concerning a submission under 35 U.S.C. 371.<br>2. <input type="checkbox"/> This is a <b>SECOND</b> or <b>SUBSEQUENT</b> submission of items concerning a submission under 35 U.S.C. 371.<br>3. <input checked="" type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below.<br>4. <input checked="" type="checkbox"/> The US has been elected (Article 31).<br>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2))<br>a. <input checked="" type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau).<br>b. <input type="checkbox"/> has been communicated by the International Bureau.<br>c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US).<br>6. <input checked="" type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)).<br>a. <input checked="" type="checkbox"/> is attached hereto.<br>b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4).<br>7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3))<br>a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau).<br>b. <input type="checkbox"/> have been communicated by the International Bureau.<br>c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired.<br>d. <input checked="" type="checkbox"/> have not been made and will not be made.<br>8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).<br>9. <input type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).<br>10. <input type="checkbox"/> An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)). |                                           |                                                                                                                        |
| <b>Items 11 to 20 below concern document(s) or information included:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                           |                                                                                                                        |
| 11. <input type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.<br>12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 1.821 and 1.822 is included.<br>13. <input type="checkbox"/> A preliminary amendment.<br>14. <input type="checkbox"/> An Application Data Sheet under 37 CFR 1.76.<br>15. <input type="checkbox"/> A substitute specification.<br>16. <input type="checkbox"/> A power of attorney and/or change of address letter.<br>17. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821-1.825.<br>18. <input type="checkbox"/> A second copy of the published International Application under 35 U.S.C. 154(d)(4).<br>19. <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).<br>20. <input type="checkbox"/> Other items or information:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                           |                                                                                                                        |

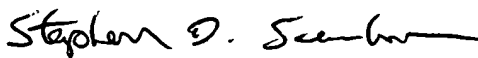
**"Express Mail" Mailing Label No. EV302218349US**

Date of Deposit December 17, 2004

I hereby certify that this paper or fees is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

By James Kinton

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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                               |                                                                                                                                                                                                                                                    |                                          |    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|----|
| U.S. APPLICATION NO. (if known, see 37 CFR 1.5)<br><b>10/518739</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              | INTERNATIONAL APPLICATION NO.<br>PCT/EP2003/106550                            |                                                                                                                                                                                                                                                    | ATTORNEY'S DOCKET NUMBER<br>838567610047 |    |
| 21. The following fees are submitted:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |              |                                                                               |                                                                                                                                                                                                                                                    |                                          |    |
| <input checked="" type="checkbox"/> a) Basic national fee .. \$300.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |              |                                                                               |                                                                                                                                                                                                                                                    | \$ 300.00                                |    |
| <input checked="" type="checkbox"/> b) Examination fee .. \$200.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |              |                                                                               |                                                                                                                                                                                                                                                    | \$ 200.00                                |    |
| <input checked="" type="checkbox"/> c) Search fee .. \$500.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              |                                                                               |                                                                                                                                                                                                                                                    | \$ 500.00                                |    |
| <b>TOTAL OF ABOVE CALCULATIONS = \$1000.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |              |                                                                               |                                                                                                                                                                                                                                                    | \$ 1000.00                               |    |
| <input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              |                                                                               |                                                                                                                                                                                                                                                    |                                          |    |
| Total Sheets                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Extra sheets | Number of each additional 50 or fraction thereof (round up to a whole number) |                                                                                                                                                                                                                                                    | RATE                                     |    |
| - 100 =                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | /50 =        |                                                                               |                                                                                                                                                                                                                                                    | x \$250.00                               | \$ |
| Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492(e)).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                                                                               |                                                                                                                                                                                                                                                    | \$                                       |    |
| CLAIMS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | NUMBER FILED | NUMBER EXTRA                                                                  | RATE                                                                                                                                                                                                                                               | \$                                       |    |
| Total claims                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 28 - 20 =    | 8                                                                             | x \$50.00                                                                                                                                                                                                                                          | \$ 400.00                                |    |
| Independent claims                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 2 - 3 =      | -                                                                             | x \$200.00                                                                                                                                                                                                                                         | \$ -0-                                   |    |
| MULTIPLE DEPENDENT CLAIM(S) (if applicable)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |              |                                                                               | + \$360.00                                                                                                                                                                                                                                         | \$ 360.00                                |    |
| <b>TOTAL OF ABOVE CALCULATIONS =</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                               |                                                                                                                                                                                                                                                    | \$ 760.00                                |    |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                                                                               |                                                                                                                                                                                                                                                    | \$                                       |    |
| <b>SUBTOTAL =</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |                                                                               |                                                                                                                                                                                                                                                    | \$                                       |    |
| Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(f)).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |                                                                               |                                                                                                                                                                                                                                                    | +                                        | \$ |
| <b>TOTAL NATIONAL FEE =</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |              |                                                                               |                                                                                                                                                                                                                                                    | \$                                       |    |
| Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |              |                                                                               |                                                                                                                                                                                                                                                    | +                                        | \$ |
| <b>TOTAL FEES ENCLOSED =</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                                                                               |                                                                                                                                                                                                                                                    | \$ 1760.00                               |    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                               |                                                                                                                                                                                                                                                    | Amount to be refunded:                   | \$ |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                               |                                                                                                                                                                                                                                                    | Amount to be charged:                    | \$ |
| a. <input type="checkbox"/> A check in the amount of \$ _____ to cover the above fees is enclosed.<br>b. <input checked="" type="checkbox"/> Please charge my Deposit Account No. <u>501432</u> in the amount of \$ <u>1760.00</u> to cover the above fees. A duplicate copy of this sheet is enclosed.<br>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>501432</u> . A duplicate copy of this sheet is enclosed.<br>d. <input type="checkbox"/> Fees are to be charged to a credit card. <b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. |              |                                                                               |                                                                                                                                                                                                                                                    |                                          |    |
| <b>NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the International Application to pending status.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |              |                                                                               |                                                                                                                                                                                                                                                    |                                          |    |
| SEND ALL CORRESPONDENCE TO:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |              |                                                                               |                                                                                                                                                                                                                                                    |                                          |    |
| Stephen D. Scanlon, Esq.<br>Jones Day<br>North Point, 901 Lakeside Avenue<br>Cleveland, Ohio 44114                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |              |                                                                               | <div style="text-align: right;"> <br/> _____<br/> SIGNATURE<br/> Stephen D. Scanlon<br/> _____<br/> NAME<br/> 32755<br/> _____<br/> REGISTRATION NUMBER </div> |                                          |    |